#### UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

K S

CHRISTOPHER FOWLER,

Plaintiff,

08 CIVIL 1927 (PAC)

-against-

**JUDGMENT** 

MICHAEL J. ASTRUE, Commissioner of
Social Security,
Defendant.
X

**SCANNED** 

Whereas the parties having stipulated that this action be remanded to the Commissioner of Social Security pursuant to sentence four of 42 U.S.C. 405(g), for further administrative proceedings, and the matter having come before the Honorable Paul A. Crotty, United States District Judge, and the Court, on August 20, 2008, having rendered its Order directing the Clerk of the Court to enter judgment remanding this matter to the Commissioner for further proceedings, it is,

ORDERED, ADJUDGED AND DECREED: That for the reasons stated in the Court's Order dated August 20, 2008, this action is remanded to the Commissioner of Social Security pursuant to sentence four of 42 U.S.C. 405(g), for further administrative proceedings.

Dated: New York, New York August 22, 2008

J. MICHAEL McMAHON

Clerk of Court
BY:

**Deputy Clerk** 

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## United States District Court Southern District of New York Office of the Clerk U.S. Courthouse 500 Pearl Street, New York, N.Y. 10007-1213

Date:			
In Re:			
	-v-		
Case #:		(	)

Dear Litigant,

Enclosed is a copy of the judgment entered in your case.

Your attention is directed to Rule 4(a)(1) of the Federal Rules of Appellate Procedure, which requires that if you wish to appeal the judgment in your case, you must file a notice of appeal within 30 days of the date of entry of the judgment (60 days if the United States or an officer or agency of the United States is a party).

If you wish to appeal the judgment but for any reason you are unable to file your notice of appeal within the required time, you may make a motion for an extension of time in accordance with the provision of Fed. R. App. P. 4(a)(5). That rule requires you to show "excusable neglect" or "good cause" for your failure to file your notice of appeal within the time allowed. Any such motion must first be served upon the other parties and then filed with the Pro Se Office no later than 60 days from the date of entry of the judgment (90 days if the United States or an officer or agency of the United States is a party).

The enclosed Forms 1, 2 and 3 cover some common situations, and you may choose to use one of them if appropriate to your circumstances.

The Filing fee for a notice of appeal is \$5.00 and the appellate docketing fee is \$450.00 payable to the "Clerk of the Court, USDC, SDNY" by certified check, money order or cash. No personal checks are accepted.

by:	
	, Deputy Clerk

J. Michael McMahon, Clerk of Court

APPEAL FORMS

Docket Support Unit

Revised: April 9, 2006

# United States District Court Southern District of New York Office of the Clerk U.S. Courthouse 500 Pearl Street, New York, N.Y. 10007-1213

	X			
		NOTICE	OF APPEAL	
<b>-V</b> -		civ.	( )	
	X			
Notice is hereby given that				
hereby appeals to the United States (	Court of Appeals for	the Second Circuit	mom the Judgment (c	jescrioe itj
entered in this action on the	day of	(month)	, <u>(year)</u>	·
			Signature)	
		-	Address)	<del></del>
		(City, State	e and Zip Code)	
Date:		( )(Tele	phone Number)	

<u>Note</u>: You may use this form to take an appeal provided that it is <u>received</u> by the office of the Clerk of the District Court within 30 days of the date on which the judgment was entered (60 days if the United States or an officer or agency of the United States is a party).

FORM 1

### United States District Court Southern District of New York Office of the Clerk U.S. Courthouse

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	<b>X</b>		
	MOTION FOR EXT		
-V-			
	civ.	( )	
	X		
Pursuant to Fed. R. App. P. 4(a)(5),	(party)		_ respectfully
requests leave to file the within notice of appeal ou			· · · · · · · · · · · · · · · · · · ·
			arty) failed to file a
desires to appeal the judgment in this action entere	(day)		
notice of appeal within the required number of day			
[Explain here the "excusable neglect" or "good cause" required number of days.]	which led to your failure to fil	e a notice of ap	opeal within the
			•
			·
	(Sign	ature)	<del></del>
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· .	(Add	ress)	_ <del></del>
	(City, State	and Zip Code)	
Date:	(, )	·	

Note: You may use this form, together with a copy of Form 1, if you are seeking to appeal a judgment and did not file a copy of Form 1 within the required time. If you follow this procedure, these forms must be received in the office of the Clerk of the District Court no later than 60 days of the date which the judgment was entered (90 days if the United States or an officer or agency of the United States is a party).

(Telephone Number)

FORM 2

#### United States District Court Southern District of New York

	Courthouse
500 Pearl Street, Ne	w York, N.Y. 10007-1213
	×
	NOTICE OF APPEAL AND
-V-	MOTION FOR EXTENSION OF TIME
	   civ. ( )
	-X
Notice is hereby given that	(party) hereby appeals to
the United States Court of Appeals for the Second	Circuit from the judgment entered on  tion of the judgment]
(party) respect	ed in the Clerk's office within the required time fully requests the court to grant an extension of time in
accordance with Fed. R. App. P. 4(a)(5).	
a. In support of this request,	· (party)
this Court's judgment was received on	and that this form was mailed to the
court on	(alc)
(date)	
	(Signature)
•	
	(Address)
	(City, State and Zip Code)
Date:	(Telephone Number)

Note: You may use this form if you are mailing your notice of appeal and are not sure the Clerk of the District Court will <u>receive</u> it within the 30 days of the date on which the judgment was entered (60 days if the United States or an officer or agency of the United States is a party).

FORM 3

#### United States District Court Southern District of New York Office of the Clerk U.S. Courthouse

500 Pearl Street, New York, N.Y. 10007-1213

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·		<b> </b> 	AFFIRMATION OF SERVICE			
-V-		  -  -	civ.	( )		
I,			, declare un	der penalty of per	jury that I have	
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whose address is:			· 	· · · · · · · · · · · · · · · · · · ·		
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Date:						
New York, New York		_		(Signature)	<del>.</del>	
		-		(Address)		
		_	(City	State and Zin Code)		